

PTO/SB/21 (09-06)

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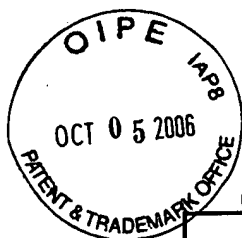
TRANSMITTAL FORM (to be used for all correspondence after initial filing)	Application Number	10/645,328-Conf. #7569
	Filing Date	August 21, 2003
	First Named Inventor	Rodolfo R. Llinas
	Art Unit	37305 (PM)
	Examiner Name	N. Natnithithadha
Total Number of Pages in This Submission	Attorney Docket Number	05986/100K521-US1

ENCLOSURES (Check all that apply)

<input checked="" type="checkbox"/> Fee Transmittal Form <input checked="" type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input checked="" type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/ Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input checked="" type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please Identify below): Amendment Transmittal Form 1449 and 2 References Check in the amount of \$180.00 Postcard
<div>Remarks</div>		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm Name	DARBY & DARBY P.C.		
Signature			
Printed name	Pierre R. Yanney		
Date	October 5, 2006	Reg. No.	35,418



Effective on 12/08/2004. Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).		Complete if Known	
FEE TRANSMITTAL For FY 2005		Application Number	10/645,328-Conf. #7569
		Filing Date	August 21, 2003
		First Named Inventor	Rodolfo R. Llinas
		Examiner Name	N. Natnithadha
		Art Unit	3735 <i>SK</i>
<input checked="" type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27	Attorney Docket No.	05986/100K521-US1	
TOTAL AMOUNT OF PAYMENT		(\$)	0.00 / 80

METHOD OF PAYMENT (check all that apply)

☐ Check ☐ Credit Card ☐ Money Order ☐ None ☐ Other (please identify): _____

☐ Deposit Account Deposit Account Number: **04-0100** Deposit Account Name: **Darby & Darby P.C.**

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

☐ Charge fee(s) indicated below ☐ Charge fee(s) indicated below, except for the filing fee

☒ Charge any additional fee(s) or underpayment of fee(s) under 37 CFR 1.16 and 1.17 ☒ Credit any overpayments

FEE CALCULATION

1. BASIC FILING, SEARCH, AND EXAMINATION FEES

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	
Utility	300	150	500	250	200	100	
Design	200	100	100	50	130	65	
Plant	200	100	300	150	160	80	
Reissue	300	150	500	250	600	300	
Provisional	200	100	0	0	0	0	

2. EXCESS CLAIM FEES

Fee Description	Small Entity	
	Fee (\$)	Fee (\$)
Each claim over 20 (including Reissues)	50	25
Each independent claim over 3 (including Reissues)	200	100
Multiple dependent claims	360	180

Total Claims **Extra Claims** **Fee (\$)** **Fee Paid (\$)**

38 - 38 = 0 x 25.00 = 0.00

HP = highest number of total claims paid for, if greater than 20.

Indep. Claims **Extra Claims** **Fee (\$)** **Fee Paid (\$)**

4 - 5 = 0 x 100.00 = 0.00

HP = highest number of independent claims paid for, if greater than 3.

3. APPLICATION SIZE FEE

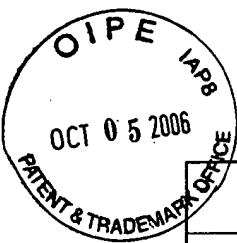
If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee (\$)	Fee Paid (\$)
_____	- 100 = _____	/50 _____ (round up to a whole number) x _____	= _____	

4. OTHER FEE(S)

	Fees Paid (\$)
Non-English Specification, \$130 fee (no small entity discount)	
Other (e.g., late filing surcharge): 1806 Information Disclosure Statement	\$180.00

SUBMITTED BY			
Signature	<i>Pierre R. Yanney</i>	Registration No. (Attorney/Agent)	35,418
Name (Print/Type)	Pierre R. Yanney	Telephone	(212) 527-7700
		Date	October 5, 2006



AMENDMENT TRANSMITTAL LETTER

Docket No.
05986/100K521-US1

Application No. 10/645,328-Conf. #7569	Filing Date August 21, 2003	Examiner N. Natnithithadha	Art Unit 3734 <i>SP</i>
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Applicant(s): Rodolfo R. Llinas

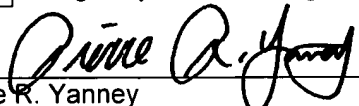
Invention: BRAIN- MACHINE INTERFACE SYSTEMS AND METHODS

TO THE COMMISSIONER FOR PATENTS

Transmitted herewith is an amendment in the above-identified application.
The fee has been calculated and is transmitted as shown below.

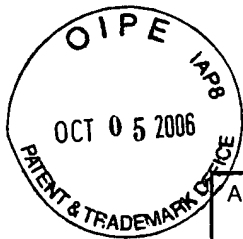
CLAIMS AS AMENDED					
	Claims Remaining After Amendment	Highest Number Previously Paid	Number Extra Claims Present	Rate	
Total Claims	38	- 38 =	0	x 25.00	0.00
Independent Claims	4	- 5 =	0	x 100.00	0.00
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					
Other fee (please specify): Information Disclosure Statement					180.00
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT:					0.00

- ☐ Large Entity ☒ Small Entity
- ☒ No additional fee is required for this amendment.
- ☐ Please charge Deposit Account No. _____ in the amount of \$ _____.
A duplicate copy of this sheet is enclosed.
- ☒ A check in the amount of \$ 180 to cover the filing fee is enclosed.
- ☐ Payment by credit card. Form PTO-2038 is attached.
- ☒ The Director is hereby authorized to charge and credit Deposit Account No. 04-0100
as described below. A duplicate copy of this sheet is enclosed.
- ☒ Credit any overpayment.
- ☒ Charge any additional filing or application processing fees required under 37 CFR 1.16 and 1.17.


Pierre R. Yanney
Attorney/Agent Reg. No.: 35,418

Dated: October 5, 2006

DARBY & DARBY P.C.
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New York, New York 10150-5257
(212) 527-7700



10-10-06

IFW/18

Application No. (if known): 10/645,328

Attorney Docket No.: 05986/100K521-US1

Certificate of Express Mailing Under 37 CFR 1.10

I hereby certify that this correspondence is being deposited with the United States Postal Service as Express Mail, Airbill No. _____ in an envelope addressed to:

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MS Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

on October 5, 2006
Date

Signature

Typed or printed name of person signing Certificate

Registration Number, if applicable

212.527.7700
Telephone Number

Note: Each paper must have its own certificate of mailing, or this certificate must identify each submitted paper.

Transmittal Form (1 page)
Fee Transmittal (1 page)
Amendment Transmittal (1 page)
Amendment in Response to Non-Final Office Action (18 pages)
Information Disclosure Statement (4 pages)
Form 1449 (1 page)
2 references (17 pages; 21 pages)
Replacement Drawings (5 sheets) (7 Figures--1, 2, 3A, 3B, 4, 5A, 5B, 6A, 6B, 6C, 7)
Check# 12646 in the amount of 180.00
Postcard